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Bib Data Sheet

CONFIRMATION NO. 7769

SERIAL NUMBER 10/687,576	FILING DATE 10/16/2003  RULE	CLASS 514	GROUP ART UNIT 1649	ATTORNEY DOCKET NO. 11918N/021452
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## APPLICANTS

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DK 2/13/06

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/418,793 10/16/2002

DK 2/13/06

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 02/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TN	SHEETS DRAWING 4	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>[Signature]</i>	INITIALS DK		
Verified and Acknowledged				

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## TITLE

Method for treatment of demyelinating central nervous system disease

FILING FEE  RECEIVED 610	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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